

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PRINTED: 08/15/2011

FORM APPROVED

OMB NO. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 155717		(X2) MULTIPLE CONSTRUCTION A. BUILDING 00 B. WING _____		(X3) DATE SURVEY COMPLETED 08/03/2011	
NAME OF PROVIDER OR SUPPLIER ALPHA HOME ASSOC OF GREATER INDIANAPOLIS INC				STREET ADDRESS, CITY, STATE, ZIP CODE 2640 COLD SPRING RD INDIANAPOLIS, IN46222			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)			ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE
F0000	<p>This visit was for the Investigation of Complaint IN00093072 and Complaint IN00094211.</p> <p>Complaint IN00093072-Unsubstantiated, due to lack of evidence.</p> <p>Complaint IN00094211- Substantiated, Federal/State deficiencies related to the allegation is cited at F240 and F242.</p> <p>Survey dates: August 2 & 3, 2011</p> <p>Facility number: 000376 Provider number: 155717 AIM number: 100275510</p> <p>Survey team: Rita Mullen, RN, TC</p> <p>Census bed type: SNF/NF: 60 Total: 60</p> <p>Census payor type: Medicare: 8 Medicaid: 48 Other: 4 Total: 60</p> <p>Sample: 4 Supplemental sample: 7</p>			F0000			

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (see instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

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F0240 SS=D	<p>These deficiencies also reflect State findings cited in accordance with 410 IAC 16.2.</p> <p>Quality review completed on August 8, 2011 by Bev Faulkner, RN.</p> <p>A facility must care for its residents in a manner and in an environment that promotes maintenance or enhancement of each resident's quality of life.</p> <p>Based on interview and record review, the facility failed to consider the preference of the alert and oriented residents whose roommates were gotten up in the early morning hours by nightshift staff and how the practice effected their quality of life. This actually effected 2 of 3 residents interviewed whose roommates were gotten up early. (Residents G and I)</p> <p>Findings include:</p> <p>During an interview with Resident I, on 8/2/11 at 9:45 A.M., she indicated that residents are gotten up for the day on the night shift and that her roommate was gotten up early, at about 6:00 A.M. each day. Resident I was awakened when her roommate was gotten up, cleaned and</p>			F0240	<p>F- 240 Residents Right to Choose: The Alpha Home under residents right and rights as citizen fully ensure residents have the right to choose their and make their own decisions with resident's preferences.</p> <p>Corrective Action Related to This Finding:</p> <p>The Alpha Home has updated its policy for resident's choices with decision-making. The Resident Council president had an executive resident council meeting to express and emphasize the right to decision making for morning get up times and decisions for resident rights. Resident:"s B, D E, &I have all been interviewed with their care plans revised and reflect the</p>		08/11/2011

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	<p>dress for the day. Resident I preferred to sleep longer.</p> <p>During an interview with Resident G, on 8/3/11 at 1:30 P.M., she indicated that her roommate was gotten at 4:00 A.M. daily and that it bothered her when they get her roommate up, cleaned and dressed that early. Resident G did not want to be awakened that early.</p> <p>During an interview with Resident J, on 8/2/11 at 10:00 A.M., it was indicated residents are gotten up early and they leave them sitting around in the Activities room or TV room.</p> <p>During an interview with Resident L, on 8/2/11 at 2:00 P.M., it was indicated residents are gotten up early at about 4:00 A.M. and they just leave them sitting.</p> <p>A review of the staff scheduling, dated 7/1/11, indicated the nightshift was from 11:00 P.M. to 7:30 A.M.</p> <p>A review of the "Get up list," dated 8/2/11, indicated 24 Residents that were to be gotten up by the nightshift and instructed if a resident refuses to get up the CNA is to report to the nurse and find an alternative resident to get up.</p> <p>During an interview with LPN #1 on</p>				<p>resident choices for a preferred get up time. Resident's family members and POA where contacted for residents not able to verbally communicate their choices.</p> <p>The Alpha Home morning residents get up list and (certified nursing assistant) assignment sheets now have the preferred time for resident's choices to get residents up in the morning. The DON has approved the preferred times and the unit manager has placed and posted the preferred time of the residents. The Customer Service focus for satisfaction shall be reviewed each morning at the managers meeting. The Director of Nurse's has in serviced the staff with the changes.</p> <p><u>Residents with Potential to be affected by this finding will be identified by:</u> Other residents having the potential to be affected by these findings are identified by: Residents listed on the morning get up sheet, resident participation in the emergency resident council meeting, and communication sent to the family council, guardians and POA. Review of residents regular scheduled care plans will allow for the residents preferences to be documented with preferences and changes. The facility has established a communication</p>		

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	8/2/11 at 1:00 P.M., she indicated that they start getting residents up around 5:00 A.M., and that it was nightshift's job to get those residents on the "Get up list" up and dressed for the day. This Federal tag relates to Complaint number IN00094211. 3.1-32(a)				quality indicator correction sheet for resident s choices; this sheet is reviewed weekly and presented monthly to the quality assurance committee. <u>III. Measures and Systemic Changes put into Place to Assure Deficit Practices do not recur are as Follows:</u> 1. Daily review and resident satisfaction for preferences presented at the morning manager meeting. 2. Daily input and correction for residents that have more than one preference in their choices as residents. 3. Tracking audits reviewed by the Director of Nurses and monitored by the unit manager presented at the manager's meeting 4. Weekly audits analyzed and presented to quality assurance committee for compliance. 5. Staff assignment sheets have been reassigned per the president's choice and preference. 6. SSD interviewed resident's roommate to ensure their choice of not being disturbed is included. 7. Consent forms for change preference with getting up completed. 8. Activity calendar now identifies the early morning activity.		

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					<u>Actions will be monitored to</u> <u>Ensure Compliance by:</u> <u>Staff who violated the faculty's</u> <u>policy on resident's choices shall</u> <u>receive the facility corrective</u> <u>action plan. Repeat violators be</u> <u>subject to the Alpha Home</u> <u>disciplinary policy which include</u> <u>suspension and/or or</u> <u>termination.</u> <u>There will be a weekly review of</u> <u>compliance with the IDT utilizing</u> <u>the audit sheets. These weekly</u> <u>audit sheets and compliance</u> <u>sheets are collected and review</u> <u>for distribution at the Quality</u> <u>assurance meeting; The Quality</u> <u>assurance committee will monitor</u> <u>monthly and make a</u> <u>determination to continue</u> <u>monitoring based on compliance,</u> <u>accuracy and successful</u> <u>residents satisfaction for rights</u> <u>and preferences.</u> - - <u>Compliance. The Quality</u> <u>Assurance for monitoring is for</u> <u>the next three months. Upon</u> <u>review by the Quality assurance</u> <u>committee a determination shall</u> <u>be made to continue the audits or</u> <u>provide an additional course of</u> <u>action.</u> - <u>Completion Date:</u> <u>August 22, 2011.</u> - -		

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F0242 SS=E	<p>The resident has the right to choose activities, schedules, and health care consistent with his or her interests, assessments, and plans of care; interact with members of the community both inside and outside the facility; and make choices about aspects of his or her life in the facility that are significant to the resident. Based on interview and record review, the facility failed to ensure residents were given the right to choose their schedules or preference for residents on the "Get up list" who are gotten up early in the morning by the nightshift. There was no indication the residents' usual time of rising before coming to the facility was considered. This actually impacted 3 of 4 residents reviewed for preferences regarding what time they would prefer to get up in the morning in a sample of 4 and had the potential to affect all residents on the "Get Up list." The current list indicated 24 of 60 residents were on the "Get up" list. (Residents B, D and E)</p> <p>Findings include:</p> <p>The clinical record of Resident B was reviewed on 8/2/11 at 10:00 A.M. Diagnoses for Resident B included, but were not limited to, dementia and diabetes. Resident B was on the "Get up list" and it was indicated during the facility tour with LPN #1, on 8/2/11 at 8:45 A.M., that Resident B was not interviewable. There was no preference</p>			F0242	<p>F- 242 Residents Right to Choose: The Alpha Home under residents right and rights as citizen fully ensure residents have the right to choose their and make their own decisions with resident's preferences.</p> <p>Corrective Action Related to This Finding:</p> <p>The Alpha Home has updated its policy for resident's choices with decision-making. The Resident Council president had an executive resident council meeting to express and emphasize the right to decision making for morning get up times and decisions for resident rights. Resident's I, G, J, and L have all been interviewed with their care plans revised and reflect the resident choices for a preferred get up time. Resident's family members and POA where contacted for residents not able to verbally communicate their choices.</p> <p>The Alpha Home morning residents get up list and (certified nursing assistant) assignment sheets now have the preferred</p>		08/11/2011

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	<p>indicated in the chart, as to what time the resident would prefer to get up in the morning or what time the resident was used to getting up before coming to the facility.</p> <p>The clinical record of Resident D was reviewed on 8/3/11 at 11:05 A.M. Diagnoses for Resident D included, but were not limited to, Paranoid schizophrenic traits, dementia and severe aphasia. Resident D was on the "Get up list" and it was indicated during the facility tour with LPN #1, on 8/2/11 at 8:45 A.M., that Resident D was not interviewable. There was no preference indicated in the chart, as to what time the resident would prefer to get up in the morning or what time the resident was used to getting up before coming to the facility.</p> <p>The clinical record of Resident E was reviewed on 8/3/11 at 12:55 P.M. Diagnoses for Resident E included, but were not limited to, senile delusions, Alzheimer's Disease and depression. Resident E was on the "Get up list" and it was indicated during the facility tour with LPN #1, on 8/2/11 at 8:45 A.M., that Resident E was not interviewable. There was no preference indicated in the chart as to what time the resident would prefer to get up in the morning or what time the</p>			<p>time for resident's choices to get residents up in the morning. The DON has approved the preferred times and the unit manager has placed and posted the preferred time of the residents. The Customer Service focus for satisfaction shall be reviewed each morning at the managers meeting. The Director of Nurse's has in serviced the staff with the changes.</p> <p><u>Residents with Potential to be affected by this finding will be identified by:</u> Other residents having the potential to be affected by these findings are identified by: Residents listed on the morning get up sheet, resident participation in the emergency resident council meeting, and communication sent to the family council, guardians and POA. Review of residents regular scheduled care plans will allow for the residents preferences to be documented with preferences and changes. The facility has established a communication quality indicator correction sheet for resident s choices; this sheet is reviewed weekly and presented monthly to the quality assurance committee.</p> <p><u>III. Measures and Systemic Changes put into Place to Assure Deficit Practices do not recur are as Follows:</u></p>			

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	<p>resident was used to getting up before coming to the facility</p> <p>During an interview with Resident I, on 8/2/11 at 9:45 A.M., it was indicated that residents are gotten up for the day, on the night shift and that her roommate was gotten up early, at about 6:00 A.M., each day, even if she didn't want to get up. Resident I was awoken when her roommate was gotten up, cleaned and dress for the day. Resident I preferred to sleep longer.</p> <p>During an interview with Resident G, on 8/3/11 at 1:30 P.M., it was indicated that her roommate was gotten at 4:00 A.M. daily and that it bothered her when they get her roommate up, cleaned and dressed that early. Resident G did not want to be awakened that early.</p> <p>During an interview with Resident J, on 8/2/11 at 10:00 A.M., it was indicated residents are gotten up early and they leave them sitting around in the Activities room or TV room.</p> <p>During an interview with Resident L, on 8/2/11 at 2:00 P.M., it was indicated residents are gotten up early at about 4:00 A.M., and they just leave them sitting.</p> <p>A Meal Time schedule, received from the</p>				<ol style="list-style-type: none"> Daily review and resident satisfaction for preferences presented at the morning manager meeting. Daily input and correction for residents that have more than one preference in their choices as residents. Tracking audits reviewed by the Director of Nurses and monitored by the unit manager presented at the manager's meeting Weekly audits analyzed and presented to quality assurance committee for compliance. Staff assignment sheets have been reassigned per the resident's choice and preference. SSD interviewed resident's roommate to ensure their choice of not being disturbed is included. Consent forms for change preference with getting up completed. Activity calendar now identifies the early morning activity. <p><u>Actions will be monitored to Ensure Compliance by:</u> <u>Staff who violated the faculty's policy on resident's choices shall receive the facility corrective action plan. Repeat violators be subject to the Alpha Home disciplinary policy which include suspension and/or or termination.</u> <u>There will be a weekly review of compliance with the IDT utilizing</u></p>		

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	<p>Director of Nursing, on 8/2/11 at 1:00 P.M., indicated breakfast was served at 7:30 P.M.</p> <p>A review of the staff scheduling, dated 7/1/11, indicated the nightshift was from 11:00 P.M. to 7:30 A.M. and three CNAs were routinely scheduled to care for 60 residents which included getting up the residents on the "Get up list."</p> <p>A review of the Activities Schedules for June, July and August, 2011, indicated activities at the facility start at 9:30 A.M.</p> <p>A review of the CNA (Certified Nursing Assistant) assignments sheets, dated 7/27/11, indicated the residents on the "Get up list."</p> <p>A review of the "Get up list," dated 8/2/11, indicated 24 residents that were to be gotten up by the nightshift and if a resident refuses to get up the CNA is to report to the nurse and find an alternative resident to get up.</p> <p>During an interview with LPN #1 on 8/2/11 at 1:00 P.M., she indicated that they (staff) start getting residents up around 5:00 A.M., and that it was nightshift's job to get those residents on the "Get up list" up and dressed for the day.</p>				<p><u>the audit sheets. These weekly audit sheets and compliance sheets are collected and review for distribution at the Quality assurance meeting; The Quality assurance committee will monitor monthly and make a determination to continue monitoring based on compliance, accuracy and successful residents satisfaction for rights and preferences.</u></p> <p>-</p> <p>- <u>Compliance. The Quality Assurance for monitoring is for the next three months. Upon review by the Quality assurance committee a determination shall be made to continue the audits or provide an additional course of action.</u></p> <p>- <u>Completion Date: August 22, 2011.</u></p> <p>-</p>		

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